

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

RECEIVED

OCT 31 2007

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Gay Wilson for City Council

IMPORTANT: Indicate by # type of committee you are reporting for: 6

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name  
Gay Lea Wilson

Political Party (if applicable)

Office Sought  
City Council - Pleasant Hill

District (if Senate or House)

FORM  
**DR-2**

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. # \_\_\_\_\_  
Logged In \_\_\_\_\_  
Scanned \_\_\_\_\_  
Computer \_\_\_\_\_  
Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Gay Lea Wilson  
SIGNATURE OF PERSON FILING REPORT

265-3257  
TELEPHONE

10/31/07  
DATE SIGNED

I AM FILING A 11/01/07 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election  
November 6, 2007

County & Local Committees, enter County in  
which Election is held POLK

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 236.68

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

1,575.00

Schedule F: Loans Received total (Attach Schedule F)

175.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 1,986.68

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1,966.65

Schedule F: Loan Repayments total (Attach Schedule F)

20.03

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 323.59

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 0.00

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 175.00

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

**A**

(Rev. 07/03)

**MONETARY  
RECEIPTS**

☐ CHECK THIS BOX IF  
AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Gay Wilson for City Council

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/09/07	ID# CK#	Ted Dyer 447 N Shadyview Blvd Pleasant Hill, IA 50327		\$50.00	<input type="checkbox"/>
10/09/07	ID# CK#	Don Bruxvoort 4926 Willow Drive Pleasant Hill, IA 50327		25.00	<input type="checkbox"/>
10/09/07	ID# CK#	Ray Svendsen 1575 Castlegar Court Pleasant Hill, IA 50327		25.00	<input type="checkbox"/>
10/09/07	ID# CK#	David Dahlquist 5204 Shriver Avenue Des Moines, IA 50312		25.00	<input type="checkbox"/>
10/09/07	ID# CK#	Diana Widmer 134 Patterson St SE Bondurant, IA 50035	aunt	40.00	<input type="checkbox"/>
10/09/07	ID# CK#	Kirk Brill 3833 E 28th Street Des Moines, IA 50317		20.00	<input type="checkbox"/>
10/09/07	ID# CK#	Aleen Albers 430 NE 60th Street Pleasant Hill, IA 50327		15.00	<input type="checkbox"/>
10/09/07	ID# CK#	Dennis Sharp 4985 Copper Creek Drive Pleasant Hill, IA 50327		100.00	<input type="checkbox"/>
10/09/07	ID# CK#	Marc & Marceil Royer 717 Bainbridge Place Goshen, IN 46526	cousin	500.00	<input type="checkbox"/>
10/09/07	ID# CK#	Robert Fagen 200 Christie Lane Pleasant Hill, IA 50327		100.00	<input type="checkbox"/>

SUB-TOTAL

\$ 900.00

**TOTAL (if last page of this schedule)**

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Gay Wilson for City Council

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/09/07	ID# CK#	Nancy Edwards 405 Plumwood Court SW Altoona, IA 50009		\$50.00	<input type="checkbox"/>
10/09/07	ID# CK#	Pennie Carroll 1700 Andrews Drive Pleasant Hill, IA 50327		50.00	<input type="checkbox"/>
10/09/07	ID# CK#	James Erickson 3818 Thornton Ave. Des Moines, IA 50321		50.00	<input type="checkbox"/>
10/16/07	ID# CK#	Mark Langerud 4925 Willow Drive Pleasant Hill, IA 50327		100.00	<input type="checkbox"/>
10/10/07	ID# CK#	Allen Barwick 5640 Twin Circle Drive Pleasant Hill, IA 50327		25.00	<input type="checkbox"/>
10/10/07	ID# CK#	Irma Pelds 1520 Castlegar Court Pleasant Hill, IA 50327		50.00	<input type="checkbox"/>
10/20/07	ID# CK#	Pat Bullard 5860 Martin Drive Pleasant Hill, IA 50327		25.00	<input type="checkbox"/>
10/16/07	ID# CK#	Dave Peterson 953 N Shadyview Blvd Pleasant Hill, IA 50327		150.00	<input type="checkbox"/>
10/16/07	ID# CK#	Charles Van Gilder 1450 Springs Drive Pleasant Hill, IA 50327		100.00	<input type="checkbox"/>
10/16/07	ID# CK#	Merlin Gamble 1525 Castlegar Court Pleasant Hill, IA 50327		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 625.00	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(Including candidate's personal funds)

## Reset Form

# A

(Rev. 07/03)

## MONETARY RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM**COMMITTEE NAME** (Must be same as on Statement of Organization)

## Gay Wilson for City Council

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/25/07	ID#  CK#	Joyce Hockensmith 3502 E 43rd Ct Des Moines, IA 50327		\$50.00	<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 50.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 1575.00	

\* Disclosure law requires candidate committees to disclose the relationship of contributors.

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 3  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09/25/07	ID# CK# 1006	US Post Office Pleasant Hill, IA 50327	postage	\$ 90.00
10/10/07	ID# CK# 1007	Staples Altoona, IA	office & printing supplies	103.83
10/17/07	ID# CK# 1008	Altoona Herald Altoona, IA	ad	350.00
10/17/07	ID# CK# 1009	Staples Altoona, IA	envelopes	60.35
10/17/07	ID# CK# 1010	Target Altoona, IA	supplies for door knockers	35.82
10/18/07	ID# CK# 1011	Staples Altoona, IA	printing supplies	134.59
10/22/07	ID# CK# 1012	Staples Altoona, IA	printing supplies	113.93
10/25/07	ID# CK# 1013	US Post Office Pleasant Hill, IA 50327	postage	943.00
SUB-TOTAL				\$ 1831.52
TOTAL (if last page of this schedule)				\$

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/25/07	ID# CK# 1014	Staples Altoona, IA	printing supplies	\$ 135.13
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 135.13
TOTAL (if last page of this schedule)				\$ 1966.65

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 2

(for Schedule B)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Gay Wilson for City Council

SCHEDULE

**D**

(Rev. 08/98)

INCURRED  
INDEBTEDNESS☐ CHECK THIS BOX  
IF AMENDING  
FORM**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
08/31/07	Gay Wilson 1550 Castlegar Court Pleasant Hill, IA 50327	parade supplies	\$ 46.08
09/14/07	Gay Wilson 1550 Castlegar Court Pleasant Hill, IA 50327	mailing supplies	46.59
10/17/07	Gay Wilson 1550 Castlegar Court Pleasant Hill, IA 50327	printing supplies	230.92
SUB-TOTAL			\$ 323.59
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 323.59

\*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1  
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

COMMITTEE NAME (Must be same as on Statement of Organization)

Gay Wilson for City Council

Reset Form

SCHEDULE  
**F**  
(Rev. 07/03)LOANS  
RECEIVED  
& REPAYED

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LASI REPORTING PERIOD \$ 0☐ CHECK THIS BOX IF  
AMENDING FORM**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable*)	AMOUNT OF LOAN
10/30/07	Gay Wilson 1550 Castlegar Court Pleasant Hill, IA 50327	self	\$ 175.00

TOTAL (PART I)

\$ 175.00

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II)

\$

From Schedule E -- TOTAL LOANS FORGIVEN

\$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 175.00

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